

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular & budget meeting of the **Brown County Human Services Committee** was held on Tuesday, October 20, 2015 at ASPIRO, 1673 Dousman Street, Green Bay, Wisconsin.

Present: Chair Evans, Supervisor Hoyer, Supervisor Haefs, Supervisor Robinson
Excused: Supervisor La Violette
Also Present: Erik Pritzl (Director of Human Services), Eric Johnson (Finance Mngr.), Jerry Polus (Veteran Service Officer), Devon Christianson (Aging & Disability Resource Center Director), Chua Xiong (Health Director). Supervisors Zima, Clancy, Jamir, Lund, Sieber, Landwehr, Gruszynski. Executive Streckenbach, Chad Weininger (Director of Administration), Dan Process (Internal Auditor), David Ehlinger (Finance Director), Sandy Parmer (Senior Accountant), Christina Connell (Senior HR Analyst), news media and other interested parties.

I. Call Meeting to Order.

The meeting was called to order by Chairman Evans at 5:34 p.m.

II. Approve/Modify Agenda.

Motion made by Supervisor La Violette, seconded by Supervisor Robinson to change the order of the agenda to move the budget portion to the beginning with the regular to follow. Vote taken. MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of September 23, 2015.

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve the minutes. Vote taken. MOTION CARRIED UNANIMOUSLY

Comments from the Public

Koren Bandoch –Golden House, Communications and Development Coordinator

Good Evening,

Our Executive Director, Karen, apologies that she could not be here tonight, but she is celebrating the journeys of local survivors at our Survivor Dinner tonight, celebrating Domestic Violence Awareness Month.

In her place, I would like to thank you for your past and present support of victim services in our community. It is only with your help and the support of our community that Golden House is here to provide safety and support to victims of domestic abuse.

Last year, Golden House received more than 6,500 calls from victims, concerned family members, and worried friends to our 24-hr helpline. Nearly 1,300 people found comfort through our shelter and outreach services, including 274 children and 79 men.

As we work to support current victims and survivors on their journey to healing, Golden House also works with the future generation to break the cycle of violence. Our team reached over 16,000 children and teens in local schools last year, talking about what healthy relationships look like and how to gain the self-esteem needed to expect respect in all their relationships.

If you would like to know any more about Golden House and the services we offer, I invite you to visit our website or stop by our University Ave site.

Thank you!

Cheryl Weber – JOSHUA

Weber thanked the committee for listening to them at meetings and individually. They were there to support the Mental Health Treatment Ad Hoc subcommittee's recommendation for funding for mental health and detox centers. The subcommittee was determined as well as JOSHUA to see needs and gaps get filled and get programs that better addressed the mentally ill and AODA programs they faced.

Tana Koss, Crisis Center & GB Officer

Koss thanked the committee for the opportunity to speak and stated she was present to represent a group that had been locally meeting since 2013, seeking solutions to a gap that was created when accessible detox went away in 2012. Their group was made up of local law enforcement, local hospitals, the Human Services Department, AODA, mental health providers, local homeless shelters, the Crisis Center and Family Services. They were asking the board to allocate resources in 2016 to help support detox services and to continue to support the expansion of CCS services to help address the gaps that current existed in the system with care for community members that were just getting started on their paths of recovery. The need for detox services was definitely there. A quick conversation with anyone from law enforcement, a local emergency room or the Crisis Center would help tell that story any night or day for that matter. The facilities and beds met the existing need they believed were here in Brown County. It really came down to an issue of funding and their group believed that allocating \$300,000 on resources to support detox would make a significant impact on the existing need. Representing local hospitals Koss informed that they supported allocating funds for detoxification services in the 2016 county budget. There had been a gap in the services for several years especially for those patients who had no financial resources to support their care. They had been a part of community groups seeking solutions for several years; the proposed budget dollars could be useable for directly providing services and contract for services to meet these needs. Green Bay hospitals Emergency departments routinely see patients who had no place to go for treatment once medically stabilized. As a hospital they will continue to look for ways to assist the county in being successful in treating this population.

Officer Van Handel informed, to keep it in perspective, he quoted, "*Wisconsin Statutes 51.45 – Prevention and control of alcoholism: (1) DECLARATION OF POLICY. It is the policy of this state that alcoholics and intoxicated persons may not be subjected to criminal prosecution because of their consumption of alcohol beverages but rather should be afforded a continuum of treatment in order that they may lead normal lives as productive members of society.*" From a law enforcement perspective they could talk all day about where detoxification fit on a continuum of treatment or continuum of care model but he felt that everyone would agree that detoxification services was a critical need and it was currently an unmet need in Brown County.

Representing the Crisis Center, Koss stated that on any given calendar day they had two to three and in sometimes an upwards of eight people in their lobby who were just bordering on the line of withdrawal symptoms and having no medical staff on hand and having their resources not meet their demands has really set their program and the individuals they were serving up for a high risk situation. With a viable detox option they truly believed that they could divert even more than the current 85% people they divert from unnecessary acute inpatient psychiatric treatment. Desperate family members call the Crisis Center regularly. They were overjoyed when their loved ones finally admitted that they had a problem and needed help and they were willing to get it today. So when Crisis Center got the call it was, "where do we go, where do we start?" Koss pleaded, help them have an answer locally by supporting detox services.

Mike Duschene, ASPIRO President & Steve McCarthy, Curative Connections

McCarthy thanked the committee on behalf of the staff and board for their work to support people with human services needs in Brown County. Last year Duschene, McCarthy and Jon Syndergaard, Director of the CP Center came before this group to ask for support for a rate increase across the board for them, they did that and it was making a significant difference for people with disabilities as well as older adults and their families. He thanked the committee for that support on their behalf as well.

Duschene welcomed the committee to ASPIRO. He informed that Syndergaard extended his gratitude as he had a prior commitment. Duschene thanked the committee for being the "choir" that they had been preaching to for years for adults with disabilities. He had said time and time again that they couldn't do the work that they did without their support. They were going to Family Care with adults with disabilities but they looked forward to a continued relationship with Brown County when it came to children services.

Although shown in proper format, the committee moved to Item 9 at this time.

1. **Review Minutes of:**
 - a. **Aging & Disability Resource Center Board of Directors (August 27, 2015).**
 - b. **Human Services Board (September 10 & October 8, 2015).**
 - c. **Veterans' Recognition Subcommittee (August 18 & September 15, 2015).**
 - d. **Ad Hoc Mental Health Treatment Committee (September 24, 2015).**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to suspend the rules to take Items 1a-d. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve Items 1a-d. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Communications – None

Human Services Department

2. **Resolution re: Helping families move from homelessness to self-sufficiency. *Standing Item until such time that there is action to be taken.***

Supervisor Robinson asked that Item 2 be removed from the agenda.

3. **Budget Adjustment Request (15-57): Any increase in expenses with an offsetting increase in revenue.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve. Vote taken. **MOTION CARRIED UNANIMOUSLY**

4. **Executive Director's Report.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to receive and place on file. Vote taken. **MOTION CARRIED UNANIMOUSLY**

5. **Resolution Authorizing Human Services to Request Waiver for Increased Service Provider Audit Threshold.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve. Vote taken. **MOTION CARRIED UNANIMOUSLY**

6. **Financial Report for Community Treatment Center and Community Programs.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

7. **Statistical Reports.**

- a. **CTC Staff – Double Shifts Worked.**
- b. **Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Hospital.**
- c. **Monthly Inpatient Data – Bellin Psychiatric Center.**
- d. **Child Protection – Child Abuse/Neglect Report.**
- e. **Monthly Contract Update.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to suspend the rules to take Items 7a-e. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to receive and place on file Items 7a-e. Vote taken. MOTION CARRIED UNANIMOUSLY

8. **Request for New Non-Continuous Vendor.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

Other

9. **Teen Parent Third Quarter Outcome Report, Catholic Charities – Informational.**

Evans thanked them for the report and the work they did and questioned of the participants, did they help them file paternity. Tara De Grave, Child & Family Services Manager at Catholic Charities of the Diocese of Green Bay informed that nearly 100% of the clients that they worked with received BadgerCare and were mandated to participate in child support unless they could file a Good Cause. They currently they had three or four clients that had an approved Good Cause claim. Otherwise yes, they were supported in establishing paternity.

Robinson thanked De Grave for the report and the work they were doing. He questioned how many total clients they worked with that would be represented in the report. De Grave informed that the report was from July to September and it was 36 clients.

At this time Robinson asked questions in regard to fathers in the Teen Parent Program. De Grave was unable to provide the exact numbers but forwarded the info via email the following day. The numbers are as follows:

- *Seven fathers have had an open file with the Teen Parent Program during the past year.*
- *In addition, 34 fathers had participated in appointments that the mothers of their children have had with workers. That accounted for 48% of fathers that have participated in appointments with the mothers during the past year.*

They will be adding these statistics to their quarterly reports beginning with fourth quarter, 2015. They will also add information about the number of cases where paternity had been established and, if not, noting that workers had assisted mothers with connecting with child support to establish paternity.

De Grave added that they had referral connections with the fathering programs at Family Services.

Motion made by Supervisor Robinson, seconded by Supervisor La Violette to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

9a. Ad Hoc Mental Health Treatment Committee Report.

Supervisor Zima informed that this was a joint effort of Sheriff Gossage, the Jail Administrator Phil Steffen, Judge Zuidmulder representing the judges, District Attorney David Lasee, Human Services Director Erik Pritzl, Behavioral Health Manager Ian Agar, Director of Administration Chad Weininger represented the County Executive, and Supervisors Hoyer and Zima represented the County Board, JOSHUA was also in attendance; quite a composite group, a lot of power in one place at the same time. He informed that their committee was working diligently and rapidly and they wanted to see something get started. The folks on the committee were really composited of a lot of aspects of their entire county budget. The jail was 95% filled, about 1/3 of people in there had mental health issues. He knew that they couldn't take them all out but the efforts of the committee would stop the flow of people to jail and it would start the decline or at least be more stable than it was right now. There was a big ax hanging over their head in the near future, a \$30 million dollar two pod operation. They were talking about it to get things started and make a dent in the problem. They were wasting resources at the jail and also not getting any help to fix the problem.

Service:	Description:	Amount:
Transitional Residential Treatment	Changes to the certification and regulation at the Community Treatment Center would allow us to offer services to populations with substance use needs. The service provides substance abuse treatment, immediate access to peer support through the environment and case management in the areas of personal health and hygiene, community socialization, job readiness, problem resolution counseling, housekeeping and financial planning.	\$300,000
Mobile Crisis Capacity Increase	Increased staffing to provide more onsite, in-person interventions for individuals experiencing a mental health crisis.	\$200,000
Detoxification Services	Funding for medically managed inpatient detoxification services in a hospital setting.	\$300,000
Day Report Center	Create a Day Report Center to serve as an alternative to incarceration for non-violent adult offenders. This would include monitoring, behavioral health screening and counseling, vocational coaching and employment support.	\$350,000
Total:		\$1,150,000

Referring to a handout (the above table) Zima presented four initiatives they'd like started. Transitional Residential Treatment meant that they had space in Brown County's existing mental health center that wasn't being utilized but they needed to make some changes in certification and regulations to accommodate more people. Pritzl added that in talking about detox services, as they worked through the issue, they could go through the detox process and fund the services but the question of what to do next was the problem. This particular piece got to that next step of where people went after they went through the detox process.

Zima informed that at one of their meetings Judge Zuidmulder talked about the mental health court he oversaw. The nine people that were in it were causing 30-40 stops by the Sheriff's Department, since participating in the program that had gone down to zero. That was a dramatic change.

Speaking to the other initiatives, Pritzl stated that the Mobile Crisis Capacity Increase was to increase staff to provide onsite interventions for people experiencing a mental health crisis whether it was at home, in a hospital or police station, etc. After listening to the people speak about detox, he didn't think they could argue that it was a need. Zima informed that Waukesha and Outagamie County had programs like the Day Report Center and they functioned and worked. People had to report daily to their whereabouts and what they were in doing in the last 24 hours. If they're left alone they could fall back on their same habits. This was a very inexpensive way to have a follow-up system so people didn't fall off the wagon.

In looking at the total projected costs of \$1,150,000, the tax rate change by adding this was 6.2 cents per thousand. It was \$6.20 on a \$100,000 house. This was a modest proposal, a bare minimum to start showing that they wanted to deal with the problems. If they didn't, they get closer to building the jail. He didn't separate those two things at all. Since the last census, in 10 years, the population grew 22,000 in Brown County while budgets stayed flat or down year after year. The total tax rate was \$4.47, which included the recommendations that were included today for everything the county did.

Supervisor Robinson thanked the committee for working on this, and the Basic Needs Committee group for the work they had done on these issues. These were real problems that needed to be addressed. Robinson questioned where the detoxification services would be located at the CTC? Pritzl responded that it would be separate from the transitional residential and in a hospital setting. The transitional residential would be using the existing community based residential facility (CBRF) beds. They were trying to see how they could use the 15 beds in the CBRF better as they were not fully utilized now. If they could do some things with regulations, open up to some different populations they could serve, then they could get people these services at their facility. They needed to check into if there were any physical changes that needed to be made. This was really the staffing aspect to get the people in place to meet regulations.

Robinson questioned if it was anticipated that they would be splitting the unit in some form, to keep a smaller CBRF going as well, besides the transitional residential treatment beds?

Pritzl responded that the great foresight of people in terms of regulation and what they had done already, was as a community based residential facility that actually was this type of facility, a transitional residential could be a CBRF, so they didn't need to change the physical setting of that piece of the regulation. They needed to understand if they could mix the populations and that's what they didn't understand yet and needed the Department of Health Services to advise them in that. They didn't need to change the regulation but they needed to change the programming.

Zima informed that they contracted for detox and they needed to determine what that cost was going to be. Next year there would be another hospital, which would provide competition and might have a little lower cost, but by and large their contract services had been a large savings to the county. They wanted to at least start with that. If it became too costly, then they evaluate whether they wanted to make a capital expenditure and build a space or not.

Robinson was just looking for clarification on if they meant a different hospital or the county's psychiatric hospital. Zima responded that Bellin had an excess capacity of about 65 beds. They're average daily count was about 25 and had space available and he felt they could work out a reasonable arrangement with them.

In regard to the mobile crisis capacity, Robinson informed that as part of his bosses training as a psychologist, he had to go out with law enforcement on calls where there was a crisis mental health issue involved, he questioned if that was included in the kind of things they were talking about with this? Pritzl responded that whether it was happening at the same time as law enforcement or not he didn't know if they were quite there yet. To get the crisis workers offsite and into the community more was what they would be trying to do.

Robison questioned if they had a location in mind for the Day Report Center. Pritzl answered that they did not at this time. The conversation started with DA Lasee when he mentioned that this had been effective in other communities. Pritzl felt it was a great model to look at. They were nowhere near the discussion of location.

Evans informed that Family Services President & CEO Jeff Vande Leest was present. He questioned if they ran a program like this in Valley? Vande Leest responded that they ran a Day Report Center in conjunction with Outagamie, serving as an alternative to incarceration for non-violent adult offenders. They had operated that since 2004. A very similar model to what Pritzl was describing. It had been a very effective program and diverted about 20 beds a day at the county jail. Evan stated they would be interested in doing something in Brown County, Vande Leest responded they would.

CTC Hospital & Nursing Home Administrator Luke Shubert was present to answer any questions regarding regulations.

La Violette thanked Supervisor Zima for his leadership on this issue and putting together a most impressive stellar committee to work on this, a terrible community problem. They put together a plan in her estimation was based on good common sense and was fiscally responsible. They needed to address this today and it wasn't going to go away by waiting. They all recognized that it was serious and had no problem supporting what they had done.

Hoyer stated that this took Supervisors Haefs idea of finding needs and brought so many different people together in a very effective way.

Sieber questioned if they knew the number of additional staff required. Pritzl responded that they didn't have a specific number of staff as they needed to make sure they had the regulations understood. It would require at least a substance abuse counselor and personal care or nursing assistants for that unit. The state needed to guide the process in terms of what they needed. The transitional residence piece would be Brown County staff at the CTC; the others would likely be contracted because they knew they had contract providers that provided the service. To be clear, mobile crisis did exist but not at the level they needed, the other three were an expansion or new and didn't exist. Detox could exist for people that had a funding source potentially but they currently didn't give it the attention it needed. Responding to Sieber, Pritzl stated that they had adequate staff to work with in terms of implementing, they were experienced in working in partnership with community providers, they had a Behavioral Health Manager and Director of Community Programs that would work with this. This was the world they worked in everyday and these

were the populations they served and tried to figure out how to serve every day. If they were given a tool that they could work with, he felt they would make it happen. Together with their Contract Administrator, their managers, supervisors, they would get it done. Based on the discussion at the committee, it would be a couple of months before they had a plan fully assembled. Zima stated they were going to move as fast as they could. They wanted the money in place to use if they could, if they don't use it all, they could carry it over because they didn't know when exactly everything was going to be set into place.

Supervisor Lund questioned if they could have it up and running by the second quarter of next year? Zima would like it before that. Pritzl felt they could in pieces for that timeframe. For the whole package, he felt a lot of things had to happen there. The Day Report Center may take a little longer because they were dealing with sites, contracts and regulations. He felt the transitional residential treatment, mobile crisis and detox were relatively fast to implement because they needed answers on regulations and staffing up for what they needed. It took time to train people.

As Chairman of Human Services, Evans thanked Supervisors Zima, Haefs, Hoyer and Erickson as well as the rest of the people that had worked on this. He was confident that the transitional residential treatment center will come together quickly, they had the providers and the law enforcement for the mobile crisis capacity and they did lots of work with Family Services to possibly partner with the detoxification services. As Chairman he did a lot of research in the Human Services area and the two issues that kept coming up were mental health and detoxification. The public might not see this as a whole but in Brown County, this was a real problem. The issue that they always had was that they couldn't put a price tag on prevention and this was so much of a proactive rather than a reactive program that had been developed by this Ad Hoc taskforce, it was quite impressive. The money could be put into the budget and it will save dollars in the future as well as lives, which was the most important thing.

Haefs asked that the committee take an individual roll call so that they verbally announced what their intentions were. In looking forward to the County Board meeting, this was all fine but it had to pass. His own impression was that they had to pass a budget by a simple majority. He had a feeling that this had a real chance to do that. He was a bit leery that it would pass by a veto-proof majority. They all knew what had happened in the past when it came to political goals of maintaining a levy. The budget as presented to him was very reasonable but it wasn't a penny below raising property taxes out of coincidence. There was a target goal. So now they were adding and they were going to increase taxes. He had a feeling that this was going to be subject to a veto. If they pass by a simple majority and it gets vetoed, and the veto was not overruled, then he wanted to go back and be able to vote "no" on the budget. He wanted a budget with this in it or he didn't want to vote for the budget. If it failed by a simple majority, then he wasn't voting for the budget. If it was vetoed and it failed to be in there, then he wanted to reconsider the budget as amended where this would not be included so he could vote, "no". Vice-Chairman Lund stated he would ask Corporation Counsel. This was one of the times where it was more to being a County Board Supervisor than worrying about a driveway at the golf course. This basically defined who they were, were they going to stand up for what was important to the community and for the citizens of this county. Obviously spend their money wisely but if there has to be a minor tax increase, he was willing to do that. If they commit to it here, they commit to it all the way through down to the County Board. Zima stated his points were well taken. They reduced the tax rate by 11 cents. This was coming back only about half of what was cut.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to appropriate \$1,150,000 for the Transitional Residential Treatment service for \$300,000, the Mobile Crisis for \$200,000, and the

Detoxification Services for \$300,000 and the Day Report Center for \$350,000 to the Special Revenue Fund. Roll Call Taken: La Violette-aye, Robinson-aye, Evans-aye, Hoyer-aye, Haefs-aye. MOTION CARRIED UNANIMOUSLY

BUDGET REVIEW

REVIEW OF 2016 DEPARTMENT BUDGETS

Comments from the Public – Budgetary Items

Veterans' Services

10. Review of 2016 Department Budget.

Veterans Service Officer Jerry Polus stated that he was comfortable with the budget; it was a fair budget and asked for support. He informed that there was one item that came up late last week in which he spoke to Evans about. The Disabled American Veterans (DAV) had applied for a federal grant program to purchase a van for transporting wheelchair bound veterans in Brown County to VA, private and personal appointments. Right now those veterans would have to use Medi-Van services. They had gone through the three step process and had received approval for their grant application. Next year they will see the federal funding flow down through the state to the county to the Green Bay Transit Authority. It was approximately \$36,000 and they had a cost-share. 80% Federal Grant with a 20% (\$7,200) cost-share.

Robinson stated he was in support but questioned if it had to come out of next year's budget? \$7,200 was not a lot of money and questioned if they could find money now and roll it over. Weininger felt there was potential if that was the will of the committee. He informed that they would have to come back and do a separate resolution. La Violette questioned if that was the easiest way to add money to next year's budget. Weininger responded that it was an easy way to do it for this year's budget; however, he thought that the vehicle didn't need to be purchased until next year. Polus informed that they wouldn't be receiving the van until the summer or fall of next year, 2016. Weininger informed that that's the reason they recommended doing it this way as opposed to using carryover funds. In that case they wouldn't have to do a resolution. Robinson informed he was fine with including it in the budget.

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to approve the Veterans' Services budget with the increase to the general property taxes by \$7,200 and increase Support Services by \$7,200. Roll Call Taken: Ayes - La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Aging & Disability Resource Center

11. Review of 2016 Department Budget.

Evans informed that their budget was approved by their board. ADRC Director Devon Christianson thanked the County Board, the Human Services Committee and Executive Streckenbach for the incredible support that they receive. They wouldn't be who they are without the combination of great staff, fundraising, federal and state grants and their relationship with the county, it was incredibly important and their support meant everything to them. Christianson referred to their initiatives on pg. 107 & 108: Modernization of Nutrition Programs, Dementia Friendly Community, Healthy Living and Diabetes Accreditation, Alzheimer's Family Caregiver Support Program (AFCSP) and Transportation Collaborative Study.

She loved the conversation tonight about prevention and how the pendulum needed to swing and the direction of let's not wait for a crisis. Their agency was all about getting people and reaching them as soon as they possibly could and supporting their caregivers who support families in their homes. Everything they did was about keeping people well and independent in their homes.

Robinson thanked Christianson and her staff for the work they did and for the role she was playing in the community right now. Christianson served on the Bay Area Community Counsel and co-chaired a recent taskforce that put together an updated report on poverty in the community. It was a great voice to come out in the community to advocate for people in poverty. He wanted to also thank the directors in various departments for what they were doing in the community as well as the staff in Human Services for the work that they did, not only in their job description but going beyond that so often. He felt it didn't get acknowledged enough.

He gave kudos on the Transportation Collaborative Study in the rural areas. He technically didn't represent a rural area but knew a lot of people that lived in those areas and it was a great thing they were doing with Planning.

He also gave kudos for their Fund Balance policy. Having a Fund Balance policy for all Fund Balances in the county would be a wonderful thing and he was hoping more departments will follow. Following questions with regard to the Fund Balance item for ADRC, Weininger informed that they were making substantial changes to the budget books and will be working with supervisors to make sure that numbers were more transparent and more easily understandable to the average taxpayer.

Evans thanked Christianson for the work that they did.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to approve the Aging & Disability Resource Center budget. Roll Call Taken: Ayes - La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Health Department

12. Review of 2016 Department Budget.

Health Department Director Chua Xiong briefly spoke to the New Initiatives on page 114.

In 2016, she will be working on a new initiative with Aging Disability and Resource Center to expand partnership in addressing the needs of our population.

Xiong informed that coming in as the new Director, she was looking at standing services and efficient ways of working with other county departments to share resources, to make sure they were fiscally responsible with programs and services that they provided. As far as regionalization the state looked at Brown County as an expert or leaders in the area and they received increased grant funding for the Wisconsin Wellness Program to take on regionalization as well as the Wisconsin Hospital Emergency Preparedness Program. They were also asked to provide consultation for Manitowoc County and they were provided a grant to do that.

One thing she pointed out was that their licensing fee remained the same and supported their licensing program at 100%; however there was potential change in the licensing year for 2016-2017 due to the merger of Department Agriculture, Trade and Consumer Protection and Dept. of Health Services Food Safety and Recreation and Licensing, at this point she was not sure where it stood. Come next year there might be changes to the fee.

Xiong informed that in Dec 2014 they had their 140 audit review which certified the BC Health Department as a Level 3 for the next five year cycle. This was a process that was very tedious. In November 2014 they did a Community Health Needs Assessment focusing on four areas (alcohol & drug misuse, oral health, mental health and nutrition) to develop a Community Health Improvement Plan which was finalized. This was with their community partners and health care providers.

Lastly the relocation of the Health Department had been discussed for a few years now and it was decided that they would be moved downtown to the Sophie Beaumont building joining Human Services in April of 2016.

Robinson thanked Xiong and her staff for all the work they were doing.

One issue that had been brought up with regard to the move to Sophie Beaumont was parking for folks coming to the Health Department; Robinson asked how it was being addressed. It was Xiong's understanding that free to park parking spaces will be made available which assured her that their clients will be served. The county cars that currently parked there would be cleared out and there will be 20 plus parking spots available for clients coming in. One thing that her predecessor and she stressed was that they wanted to make sure there were no barriers in front of their clients because these individuals were coming in for their Tuberculosis medication, HIV testing, vaccines preventable diseases such as measles, mumps, and rubella; and some clients could not afford parking. Xiong informed that they saw roughly 40 or so clients a day, each for approximately 15-30 minutes. There was also a garage that they would use for car seat installation. Robinson questioned if there was concern with maxing out the 20 and was there room to expand the number of parking spots? To him, that was a fairly important thing. Xiong was unable to answer that. Pritzl stated that the parking spots were currently used by some director's, the County Executive and for county vehicles to transport clients or by staff for various activities. Those vehicles would be displaced. Parking was a problem that they managed every day; they had people that plugged meters, got towed, and try and solve this problem in very creative ways. Xiong and Pritzl explained that there was a planning committee in place to look at all the issues associated with the move, so that the public and operational needs were met. They didn't know if that number was adequate or not and that group would identify what they had to work with, what they needed and what they needed to ask for.

Robinson felt Pritzl answered the question, parking was a problem and now they were adding more need. Pritzl felt part of it was because of how they were configured with their vehicles and once they start moving them offsite then they will be able to figure out the traffic flow and what it meant for the number of people coming. Robinson was all in favor of consolidating into buildings because it was making better use of space but he didn't want this to make it harder for people to access services they were intending them to get to. This went for office space as well. If they could make it work, wonderful.

Xiong informed that they were trying to explore all the possibilities such as holding clinics off-site and into the community; either at the library, museum, and at the Aging Disability Resource Center. Agreeing with Pritzl, they needed to look at the logistics and other options and opportunities. She understood that there was office space available downtown and they were spending a lot of money on rent that funding could be used for other programs.

Given the bigger picture, Robinson questioned if they felt good about the move? Xiong responded that change was difficult, there were pros and cons and she had been thinking about it seriously and worried about programs and services and staff and parking but she was trying to look at it more as a positive. Looking at health care in other areas where they were limited in their resources and what they had but they make their means by taking advantage of opportunities and using their resources. She didn't know if it would work out as things were undetermined at this point but she was trying to be positive. Yes, she would love to have more but she was trying to be fiscally responsible and also make sure that the services were being provided.

Responding to Evans, Xiong informed that they were at 11,000 sq. ft. currently and would go to 7,800 sq. ft. Streckenbach clarified that the 11,000 was not technically all useable space. Of actual program space, it was closer to 8,500 sq. ft. People may question if it was ideal, no one wanted change however

there was an opportunity to take advantage of underutilized space. From their perspective, they were trying to figure out how they were able to bring forward the Health Department into the Human Services Department that could take advantage of the space that had been vacated by long term care. From the initial specs of what Facilities put together, they felt it could be done and the space was available. They had been moving people around since 2012 knowing eventually that they looking at doing this. Initial reviews that were done with the former Human Service Director and now with Pritzl, they felt that this could be done.

Supervisor Evans questioned if there were problem where they were right now with their customers being served, Xiong responded, no. Evans stated, it's not broke, but they were going to fix it. This was more of an Executive move than a legislative move and didn't know how much say they had over it. It bothered him when he heard that they had planning and logistic barriers and difficulties that they had to figure out when nothing was broken right now. It bothered him when they said it was undetermined if it would work but nothing was broke right now. He knew by going there for meetings that there was unusable space but he saw how tight it was now. He worried about the statement where they could use other county facilities as the population that they dealt with knew where they needed to go to get services and let's confuse them even more. He would be against the move, he understood where she was coming from fiscally but he'd rather see the county buy a building.

Xiong informed that they were currently paying on a month to month basis to use the current facility. The move would save them about \$88,000; \$84,000 was rent, \$4,000 was parking.

Clancy questioned if a shuttle service for county employees was ever considered so there wasn't a traffic problem. Evans stated that that was a whole other issue but he appreciated the comment.

Motion made by Supervisor La Violette, seconded by Supervisor Robinson to approve the Health Department budget. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Human Services Department

13. Review of 2016 Department Budget.

Pritzl stated they had been working very hard to get their budget ready the past few months. He couldn't say enough to start with the amount of work the management team at Human services had put into this as well as the amount of support and commitment and devotion to the populations that they served and how it came to play when they put together a document like this in terms of a budget. He couldn't say enough about how gifted he was to have the team he had behind him.

Pritzl informed that they had the transition of Family Care and it was not done and delayed to some extent so they had to figure out how that impacted things. They had to deal with the fact that they had new key management positions such as his position, their new Finance Manager, and the Hospital Nursing Administrator. They were all coming together right now to start advancing this work and their priorities for 2016. They put together something that made sense within the framework they were working with and highlighted items in terms of the budget.

Pritzl briefly went through the Summary Highlights on pg. 122 of the budget book. Overall they tried to put together a package that had some new initiatives, new directions, at the same time preserving their current services in a way that built on what they could do well. They were grateful for the support of the board, the committee and the County Executive. As they put it together, it was good to have that guidance but also to be able to have those conversations of what did they need and how do they move ahead.

Responding to Evans question regarding funds for Family Care for 2016, Weininger stated that they were taking some General Government revenue and putting it in their budget to help offset the cost of that payment. The reason they were doing that was they didn't want to go into a negative fund balance for Community Programs. They put it in there to balance it, so in 2016 there will be about \$700,000 in the fund balance, 2017 will dip down to \$364,000 but every year subsequent it started building up so 2018 was \$500,000, 2019 would be about \$1.3, 2020 would be about \$2.5, 2021 would be about \$3.6 – that was holding everything constant.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to approve the Human Services budget. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

- a. Resolution re: Approving New or Deleted Positions during the 2016 Budget Process (Human Services – Community Programs).**

Motion made by Supervisor Hoyer, seconded by Supervisor Haefs to approve with the amendment to delete a Clerk II and add an Overpayment Specialist. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

- b. Resolution re: Approving New or Deleted Positions during the 2016 Budget Process (Human Services - Community Treatment Center).**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve with the amendment to increase the FTE count by an additional 3.5 Nursing Assistant positions and also increase General Revenue under the CTC budget by \$159,374. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Other

- 14. Audit of bills.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to pay the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

- 15. Such other Matters as Authorized by Law.**

- a. Discussion regarding dates and times for November and December meetings.**

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December to be determined.

- 16. Adjourn.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to adjourn at 7:42 p.m. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Recording Secretary